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STATUS AND ENTRY
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MS 16
PATENT
0717-0445P

IN THE U.S. PATENT AND TRADEMARK OFFICE

Applicant: KAWANISHI et al. Conf.: 8167
Appl. No.: 09/667,775 Group: 2826
Filed: September 22, 2000 Examiner: J. MONDT

For: SEMICONDUCTOR LASER DEVICE, OPTICAL TRANSMISSION
DEVICE, OPTICAL TRANSMISSION SYSTEM, ELECTRONIC
DEVICE, CONTROL DEVICE, CONNECTOR, COMMUNICATION
DEVICE, AND OPTICAL TRANSMISSION METHOD AND DATA
TRANSMISSION AND RECEPTION METHOD

Patent No.: Issued:

Control No.:

ATTN: REFUND SECTION
ACCOUNTING DIVISION
OFFICE OF FINANCE

06/18/2004 EEKUBAY1 00000004 022448 09667775

01 FC:1201 252.00 DA

REQUEST FOR REFUND

(Improper Charge of Deposit Account)

MS 16

Director of the U.S. Patent
and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

May 6, 2004

Sir:

I. REFUND REQUEST

This is a request for a refund with respect to the charge to Deposit Account
02-2448 shown on the statement for the month of February 2003 for the above-
identified

☒ application

☐ patent

Adjustment date: 06/18/2004 EEKUBAY1
02/27/2003 ASNITH 00000009 022448 09667775
01 FC:1201 420.00 CR

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Docket No. 0717-0445P

- ☐ A copy of the monthly statement in which the error referred to occurs, accompanies this request.

II. FEES CHARGED FOR WHICH REFUND REQUESTED

	AMOUNT OF REFUND REQUESTED
<input type="checkbox"/> filing fee	_____
<input type="checkbox"/> surcharge for filing the basic filing on a date later than the filing date of the application (37 C.F.R. § 1.16(e))	_____
and/or	
<input type="checkbox"/> surcharge for filing the oath or declaration on a date later than the filing date of the application (37 C.F.R. § 1.16(e))	_____
<input type="checkbox"/> extension of term	
<input type="checkbox"/> first month	_____
<input type="checkbox"/> second month	_____
<input type="checkbox"/> third month	_____
<input type="checkbox"/> fourth month	_____
<input checked="" type="checkbox"/> excess claims	<u>168.00</u>
<input type="checkbox"/> issue fee	_____
<input type="checkbox"/> petition fee	_____
<input type="checkbox"/> patent maintenance fee	
<input type="checkbox"/> first maintenance fee	_____
<input type="checkbox"/> second maintenance fee	_____
<input type="checkbox"/> third maintenance fee	_____
<input type="checkbox"/> patent maintenance fee surcharge	_____
<input type="checkbox"/> Other: _____	_____

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TOTAL REFUND REQUESTED

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III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

On February 27, 2003 the PTO charged deposit account 02-2448 \$420.00 referencing code 1201 (independent claims in excess of three. \$420 would account for 5 independent claims over the amount already paid. The Amendment of February 6, 2004 caused newly independent claims 4, 5 and 6 bringing the total independent claims to 10, 7 of which had already been paid for upon the filing of the application. Thus, 3 and the \$84 rate totals \$252.00 not \$420.00. Thus Applicant respectfully requests a refund of the difference which equals $\$420 - \$252 = \$168.00$

IV. MANNER OF REFUND

Please make the requested refund by crediting Account No. 02-2448.

We respectfully request that the attached copy of this letter be returned to us with an indication that the credit has been processed.

Respectfully submitted,

BIRCH, STEWART, KOLASCH & BIRCH, LLP

By  (reg. #40,417)
for Charles Gorenstein, #29,271

RWD
CG/RWD/kmr
0717-0445P

P.O. Box 747
Falls Church, VA 22040-0747
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Attachment(s)

(Rev. 02/18/2004)